	GN FINANCE RIFE OF WISCONS		4-13-10 +	0 6-30-10
Is This Report an Amendment: Yes Instructions for completing schedules are on the ba	☑ No		MILWAU	KEE COUNTY N COMMISSION
COMMITTEE IDENTIFICATION	ack of each schedule		2010 JUL	20 PM 4: 24
Name of Committee			BEC	EIVED
Street Address	(4)		OFFICE	USE ONLY ()
City, State and Zip Code Milwwycy, WI S3210	<u></u>	.	WSEB ID Numbe	r:
Please check if address is different than previously reported,	and complete the Campa	nign Registration Sta	tement in the back	of this form.
NAME OF REPORT				
January Continuing Pre-Primary	Spring	Fall Spec	ial	
☑ July Continuing 2010 ☐ Pre-Election	Spring [Fall Spec	ial als	Termination Report o complete Schedule 4
SUMMARY OF RECEIPTS AND DISBURSEMENTS 1. RECEIPTS	Column A This Period	Column B Calendar Year-To-Date		ted Totals e Use Only
IA. Contributions (Including Loans) from Individuals	s 7200	\$ 1105	3 200.00	\$ 1105.00
1B. Contributions from Committees (Transfers-In)	\$ 💍	\$ 0	s -	s -
1C. Other Income and Commercial Loans	\$ 0	s 0	s -	s -
TOTAL RECEIPTS (Add totals from IA, IB and IC)	\$ 200	\$ 11,05 1	s 200.00	\$1105.00
2. DISBURSEMENTS				
2A. Gross Expenditures	s 327.68	\$ 1,041.00	s 327.68	\$ 1041.00
2B. Contributions to Committees (Transfers-Out)	\$ 50.00	\$ 50.00	\$ 50.00	\$ 50.00
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$ 377.68	<u>\$ 1,091.00 ,</u>	\$ 377.68	\$ \$1091.00
CASH SUMMARY				
Cash Balance Beginning of Report	s 191.68		\$ 19	11.68
Total Receipts	\$ 200.00			00.00
Subtotal	\$ 391.68		s 3	91.68
Total Disbursements	\$ 371.68		s3	77.68
CASH BALANCE END OF REPORT	\$ 14.00		S	14.00
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	s		s	
LOANS (Balance at the Close of This Period-3B)	s -		s	
I certify that I have examined this report and to the best			rect and complete.	
1 °-~ ,	ignature of Candidate or Trea	isurer	Date: 7-2	20-10
Joe Mar Hooper	of in		Daytime Phone:	414-202-1628

The information on this form is required by ss.11.06, 11.20, Wis, stats. Failure to provide the information may subject you to the penalties of ss.11.60, 11.61, Wis. Stats.

SCHEDULE 1-A

RECEIPTS Contributions (Including Loans) From Individuals

Page _____ of ____

Complete Comm				
Trie	mos of Carcy foxder			
		ich schedule. Occupation, Name and Address of Principal Place	Amount	Catendar
Date	Corey Foster Uryo N 61 2 milworke, we 53210	Of Employment (if year-to-dale total exceeds \$100)	Aironit	Year-to-Date Total
14 19 10	Corey Fosio			\$ 600
	4840 N BIS	Candidate	\$200	
	milwalee, wi 55210	Candidate	l l	Office Use
1			-	
Date	Check if: In-Kind Conduit Loan Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place		Calendar
, ,	• • • • • • • • • • • • • • • • • • • •	Of Employment (if year-to-date total exceeds \$100)]	Year-to-Date Total
' '				
1			-	Office Use
1		vi l	1	
l	Check if: 3 In-Kind Conduit CLoan	:	ŀ	
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
1 , ,		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
1			į	
			ŀ	Office Use
	1			1
	Check if: In-Kind Conduit Loan			
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (if year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1				, , , , , , , , , , , , , , , , , , , ,
1				
				Office Use
1				
Date	Check if: Stn-Kind Conduit Loan Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
	Full Mattie, Maintig Audioss and Elp Code	Of Employment (if year-to-date total exceeds \$100)	AIROUR	Year-to-Date Total
' '	1			
İ		;		Office Use
1		1 2 4		Onice Use
	Check if: Tin-Kind Conduit Loan			
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
1 1		Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
		•		Office Use
	Check if: In-Kind C Conduit C Loan			
Date	Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place Of Employment (If year-to-date total exceeds \$100)	Amount	Calendar Year-to-Date Total
1 1		or Empoyment (in your to believe the property)	1	
1			5.4	
ļ				Office Use
1			ļ	1
Date	Check if: In-Kind Conduit Loan Full Name, Mailing Address and Zip Code	Occupation, Name and Address of Principal Place	Amount	Calendar
	t on (tane, making rectors and Esp obto	Of Employment (if year-to-date total exceeds \$100)		Year-to-Date Total
/ /				
				Office Use
				211104 455
	Check if: [] In-Kind [] Conduit [] Loan		1	
			\$ 200	200.00
	SUE	STOTAL ITEMIZED CONTRIBUTIONS THIS PAGE	- 700	
		TOTAL ITEMIZED CONTRIBUTIONS	s 200	200.00
	тот	AL UNITEMIZED CONTRIBUTIONS \$20 OR LESS	s — .	
	TOTAL C	ONTRIBUTIONS RECEIVED FROM INDIVIDUALS	\$ 200	200.00

SCHEDULE 2-A

DISBURSEMENTS Gross Expenditures

Page ___ of ___

Complete Commi	now of Corex Faster		29	
	completing schedules are on the back of each schedule.			
Date	Full Name, Mailing Address and Zip Code	Specific Purpose of	Amount .	Office Use
4 123 /10	Of Person or Business to Whom Payment is Made	Expenditura	,	011100 030
	SUS is st Paul, Williams 53233 Check ill: 1 In-Kind Offset	24 cm/n.	132.00	
Date	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
5 13110	Union copies 3660 5 43°01 St Milwell, Life Check II: 3 In-Kind Offset 53219	Flyes	79.20	#
16	Full Name, Mailing Address and Zip Code Of Person or Rusiness to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
4 120110	Check II: 13 In-Kind Offset Milowa , LIF 53216	Sypho	3.70	
Date	Full Name, Mailing Address and Zlp Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
, ,	Check if: 🖸 In-Kind Offset	refurns check from precious report	75.00	
Date	Crieck is: [3] In-kind Oriset Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
1 1	Check if: [] In-Kind Offset			
Date / /	Puli Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
Date	Check if: In-Kind Offset Full Name, Mailing Address and Zip Code	Consider Property of		0/6/- 1/
1 1	Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
	Check if: In-Kind Offset			
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
ţ	Check if: n-Kind Offset			
Date / /	Full Name, Mailing Address and Zip Code Of Person or Business to Whom Payment is Made	Specific Purpose of Expenditure	Amount	Office Use
	Check if: In-Kind Offset			<u> </u>
	SUBTOTAL ITEMIZED EXP	ENDITURES THIS PAGE	\$ 2.89.90	289.90
	TOTAL ITE	EMIZED EXPENDITURES	s 2 89.90	289.90
	TOTAL UNITEMIZED EXPE	NDITURES \$20 OR LESS	: 37.78	37.78
		TOTAL EXPENDITURES	, 327.65	327.68

SCHEDULE 2-B

DISBURSEMENTS Contributions To Committees (Transfers-Out)

	i	1
Page _	of	

Complete Committee Name			
Freds	αĹ	Carcy	taste/
Instructions for completing	g sched	luies are on	the back of each schedule.

Date	Full Name, Mailing Address and Zip Code	Amount	Calendar	Office Use
1 1	Friends at Borbone Folker		Year-To-Date Total	
	Friends of Sortes Toled 3 F35 N 56#34 Melu, MT 53266 Check if: [] In-Kind [] Loan ID# #6104213 Full Name, Mailing Address and Zip Code	50.00	50.00	
Date	Check if: I In-Kind II Loan ID#	Ammust	0-1	-
1 /	rus Name, Maling Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
	Chastife Et to Kind Et Loon 104			
Date	Check if: S In-Kind E Loan ID# Full Name, Mailing Address and Zip Code	Amount	Calendar	Office Use
1 1		, 	Year-To-Oate Total	Onine use
	Check if: [7] to-Kind [7] Loan 10#			
Date	Check if: 1n-Kind C Loan ID#	Amount	Calendar	Office Use
1 1			Year-To-Date.Total	
	Check if: [3] to-Kind [7] Loan ID#			
Date	Check it: 1 In-Kind 1 Loan ID#	Amount	Calendar	Office Use
1 1			Year-To-Date Total	
	Check if: 17 In-Sind 17 Loss 10#			
Date	Check if: In-Kind Loan 10# Full Name, Mailing Address and Zip Code	Amount	Calendar	Office Use
1 1			Year-To-Date Total	
	Check if E lacking E tong 108	[
Date	Check if: 1 In-Kind L Loan ID# Full Name, Mailing Address and Zip Code	Amount	Calendar	Office Use
1 1			Year-To-Date Total	
Date	Check if: In-Kind Loan ID# Full Name, Mailing Address and Zip Code			
	ruii Name, Mailing Address and Zip Code	Amount	Calendar Year-To-Date Total	Office Use
I I				
	Check if: In-Kind T Loan IO#			
Date	Full Name, Mailing Address and Zip Code	Amount	Calendar	Office Use
I = I			Year-To-Date Total	
	Check if: ☐ In-Kind ☐ Loan ID#			
Date	Full Name, Mailing Address and Zip Code	Amount	Calendar	Office Use
I = I			Year-To-Date Total	-
	Check if: [] In-Kind [] Loan ID#			
St	JBTOTAL CONTRIBUTIONS (Transfers-Out) THIS PAGE	\$ 50.00		50.00
		\$0.00	1	50.00
TOTAL CO	NTRIBUTIONS (Transfers-Out) MADE TO COMMITTEES	s 50.00		50.00